

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**CERTIFICATE OF ELECTRONIC FILING**

I hereby certify that this correspondence is being electronically filed with the United States Patent and Trademark Office via the EFS web on December 15, 2009.



Charles P. Romano, Reg. No. 56,991

In re patent of: Olivo et al.	:	Atty. Docket No.: 66146-50664
	:	
Patent No. 7,585,667	:	Examiner: Stuart Snyder
	:	
Issued: September 8, 2009	:	Group Art Unit: 1648
	:	
For: Negative Strand RNA Virus Replicon	:	Conf. No.: 2262
	:	
	:	Customer No.: 021888

ATTN: Certificate of Correction Branch  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR EXPEDITED ISSUANCE OF CERTIFICATE OF CORRECTION-  
ERROR ATTRIBUTABLE TO AN OFFICE MISTAKE  
UNDER 37 C.F.R. §1.322**

Applicants undersigned representative of the above referenced patent hereby requests that the Patent Office issue a Certificate of Correction of Office Mistake under 37 C.F.R. §1.322. This Office mistake is clearly disclosed in the records of the Office that show that the Applicants clearly requested in papers accompanying the payment of the issue fee dated August 4, 2009 that the Assignee name of Apath, LLC be printed on

the patent. Applicants hereby provide the Office with a copy of the Part B - FEE(S) Transmittal wherein Apath, LLC is listed as an Assignee.

In providing the attached documentation, Applicants believe that they have unequivocally established that this error was due to a mistake of the Office. Applicants also provide herewith a text of the requested correction on the Certificate of Correction form PTO/SB/44 as per MPEP §1485. Therefore, Applicants respectfully request Expedited Issuance of this Certificate of Correction as outlined in MPEP §1480.01.

The error made by the Office is indicated on the enclosed duplicate form and do not change the scope of the invention or constitute new matter.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Charles P. Romano", is written over a horizontal line.

Charles P. Romano, Reg. No. 56,991  
**Thompson Coburn LLP**  
One US Bank Plaza  
St. Louis, MO 63101-1693  
(314) 552-6255  
(314) 552-7255 (fax)  
Attorney for Assignee

**Dated: December 15, 2009**

# PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to:

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-  
1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

21888 7590 05/04/2009

THOMPSON COBURN LLP  
ONE US BANK PLAZA  
SUITE 3500  
ST LOUIS, MO 63101

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Maribeth Hookway	positor's name)
<i>Maribeth Hookway</i>	(Signature)
August 4, 2009	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO. I	CONFIRMATION NO.
10/560,655	08/11/2006	Paul D. Olivo	66146-50664	2262

TITLE OF INVENTION: NEGATIVE STRAND RNA VIRUS REPLICON

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE I	PREY. PAID ISSUE FEE I	TOTAL FEE(S) DUE I	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	08/04/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
SNYDER, STUART	1648	435-320100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Thompson Coburn LLP

2 Charles P. Romano, Ph.D.

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Apath, LLC

The United States of America as represented by The Department of Health and Human Services Washington, DC  
Rush University Medical Center Chicago, IL

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

St. Louis, MO

Chicago, IL

Please check the appropriate assignee category or categories (will not be printed on the patent) :Individual ☒ Corporation or other private group entity

☒ Government

4a. The following fee(s) are submitted:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☐ A check is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-0823(enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date

Typed or printed name Charles P. Romano

Registration No. 56,991

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

## UNITED STATES PATENT AND TRADEMARK OFFICE CERTIFICATE OF CORRECTION

Page 1 of 1

PATENT NO. : 7,585,667 B2  
APPLICATION NO.: 10/560,655  
ISSUE DATE : September 8, 2009  
INVENTOR(S) : Paul D. Olivo, Peter L. Collins and Mark E. Peeples

It is certified that an error appears in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

On Page 1, in Field (73) Assignees should read: --**Apath, LLC**, St. Louis, MO (US);-- **The United States of America as represented by The Department of Health and Human Services**, Washington, DC (US); **Rush University Medical Center**, Chicago, IL (US)

### MAILING ADDRESS OF SENDER (Please do not use customer number below):

Charles P. Romano, Ph.D.  
Thompson Coburn LLP  
One US Bank Plaza  
St. Louis, MO 63101

This collection of information is required by 37 CFR 1.322, 1.323, and 1.324. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Attention Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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